

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective December 8, 2004

Application or Docket Number

| ᆫ  |  |   |  |                                    |                       |  |       |                     |                        |         |                         |                        |
|--|--|---|--|------------------------------------|-----------------------|--|-------|---------------------|------------------------|---------|-------------------------|------------------------|
| CLAIMS AS FILED - PART I   |  |   |  |                                    |                       |  |       | SMALL ENT           | rity_                  |         | OTHER THAN              |                        |
| L  |  |   | (Colum   | ın 1)                              | (Column 2)            |  |       | TYPE                |                        | OR<br>- | SMALL                   | ENTITY                 |
| U.S  | 3. NATIONAL                                    | STAGE FEES                                    |  |                                    |                       |  | RATE  | FEE                 | ]                      | RATE    | FEE                     |                        |
| BAS  | SIC FEE  |   | SMALL ENT.   | . = <b>\$</b> 150                  | LARGE ENT. = \$ 300   |  |       | BASIC FEE           |                        | OR      | BASIC FEE               | 300                    |
| EXAMINATION FEE  |  |   | Satisfies PCT A<br>(4) = \$50  | 7 \$ 100                           | \$                    | ther situations =<br>\$ 100 / \$ 200   |       | EXAM. FEE           |                        | 1       | EXAM. FEE               | 200                    |
| SEARCH FEE   |  |   | U.S. is ISA = \$50 / \$100<br>ALL other countries =<br>\$200 / \$400 |                                    | All of                | All other situations = \$ 250 / \$ 500 |       | SEARCH FEE          |                        |         | SEARCH FEE              | 400                    |
| FEE  | FOR EXTRA                                      | SPEC. PGS.                                    | minus 100 =  |                                    | / 50 =                |  |       | X \$ 125 =          |                        |         | X \$ 250 =              |                        |
| тот  | TAL CHARGEA                                    | BLE CLAIMS                                    | 16 mir   | inus 20 =                          | *                     |  |       | X \$ 25 =           |                        | OR      | X \$ 50 =               |                        |
| IND  | EPENDENT CL                                    | AIMS  | d'u  | ninus 3 =                          | *                     |  |       | X \$ 100 =          |                        | OR      | X \$ 200 =              |                        |
| Ь.   |  | IDENT CLAIM PR                                |  |                                    |                       |  |       | + \$ 180 =          |                        | OR      | + \$ 360 =              |                        |
| * If the difference in column 1 is less than zero, enter "0" in column 2 |  |   |  |                                    |                       | olumn 2                                | -     | TOTAL               |                        | OR      | TOTAL                   | 900                    |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)            |  |   |  |                                    |                       |  |       | SMALL ENTITY (      |                        |         | OTHER THAN SMALL ENTITY |                        |
| INT A  | ·  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT     |  | HIGHE<br>NUME<br>PREVIO<br>PAID F  | EST<br>BER<br>DUSLY   | PRESENT<br>EXTRA                       | [     | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                    | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT  | Total  | *   | Minus  | **                                 |                       | =                                      |       | X \$ 25 =           |                        | OR      | X \$ 50 =               |                        |
| AME  | Independent                                    | *   | Minus  | ***                                |                       | =                                      |       | X \$ 100 =          |                        | OR      | X \$ 200 =              |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |  |                                    |                       |  | [     | + \$ 180 =          |                        | OR      | + \$ 360 =              |                        |
| _  |  |   |  |                                    |                       |  | -     | TOTAL ADDIT.<br>FEE |                        | OR      | TOTAL ADDIT.<br>FEE     |                        |
|  |  | (Column 1)                                    |  | (Colum                             |                       | (Column 3)                             | _     |                     |                        |         |                         |                        |
| NT B   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT     |  | HIGHE<br>NUMB<br>PREVIOU<br>PAID F | BER<br>USLY           | PRESENT<br>EXTRA                       |       | RATE                | ADDI-<br>TIONAL<br>FEE |         | RATE                    | ADDI-<br>TIONAL<br>FEE |
| AMENDME  | Total  | *   | Minus  | **                                 |                       | =                                      |       | X \$ 25 =           |                        | OR      | X \$ 50 =               |                        |
| AME  | Independent                                    | *   | Minus  | ***                                |                       | = .                                    |       | X \$ 100 =          |                        | OR      | X \$ 200 =              |                        |
|  | FIRST PRESI                                    | ENTATION OF MU                                | JLTIPLE DEPE   | NDENT C                            | LAIM                  |  |       | + \$ 180 =          |                        | OR      | + \$ 360 =              |                        |
| •  |  |   |  |                                    |                       |  | 7     | TOTAL ADDIT.<br>FEE |                        | OR      | TOTAL ADDIT.<br>FEE     |                        |
|  |  |   |  |                                    |                       |  |       | -                   | •                      |         | · <del></del> _         |                        |
| ٠,   | es et a contra in make                         | 4 !- ! # #                                    |  |                                    |                       |  |       |                     |                        |         |                         |                        |
| 1  | If the "Highest Nuπ                            | mn 1 is less than the mber Previously Paid    | For IN THIS SPA  | ACE is less t                      | than '20'             | r. enter "20"                          |       |                     |                        |         |                         |                        |
| <br>יר   | The "Highest Num                               | mber Previously Paid<br>ber Previously Paid F | For IN 1 HIS SPA<br>For (Total or Inde                               | ACE is less tependent) is          | than '3',<br>the high | enter "3".<br>est number found in      | n the | appropriate box     | in column 1.           |         |                         |                        |